

PART B - FEE(S) TRANSMITTAL

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21324 7590 05/13/2009

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(Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|------------------------|---------------------|------------------|
| 10/674,270 | 09/29/2003 | Christopher S. de Voir | II7163.00092 | 3098 |

TITLE OF INVENTION: APPARATUS FOR THE CLASSIFICATION OF PHYSIOLOGICAL EVENTS

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|---------------|---------------------|----------------------|------------------|------------|
| nonprovisional | NO | \$1510 | \$300 | \$0 | \$1810 | 08/13/2009 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|--------------------|----------|----------------|
| BROWN JR, NATHAN H | 2129 | 706-020000 |

| | | |
|--|---|---------------------------|
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | 1 Hahn Loeser & Parks LLP |
| <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. | | 2. |
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(A) NAME OF ASSIGNEE

Biotronik GmbH & Co. KG

Germany

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

| | |
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| <input checked="" type="checkbox"/> Issue Fee | <input type="checkbox"/> A check is enclosed. |
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Authorized Signature /David J. Muzilla/ Date June 19, 2009
 Typed or printed name David J. Muzilla Registration No. 50,914

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